

GEETANJALI UNIVERSITY

N.H.8, Bypass, Near Eklingpura Chauraha, Udaipur (Rajasthan) - 313001 Phone: +91 (0294) 2500000-6; Fax No.: +91 (0294) 2500007; www.geetanjaliuniversity.com [Established under Act No. 07 of 2012]

All India Pre-Ph.D. Entrance Examination: 2024-25

for Admission to DOCTORATE (Ph.D.) in Medical, Pharmacy, Dentistry, Physiotherapy and Allied Health Sciences

APPLICATION FORM

Form No.: GU/Ph.D./						
To be filled in CAPITAL letters only		Paste Recent Passport Size Photograph (Do				
Course Name : Ph.D. ()	not staple / pin the				
		Photo)				
1. Candidate's Name :						
2. Date of Birth: 3. Gender:						
	YYYY	M F				
4. Marital Status : Single Married						
5. Nationality :						
6. Category: Gen SC ST	OBC Others (Ple	ase specify)				
7. Differently-Abled :	Yes No					
8. Economically Weaker Section :	Yes No					
9. (a) Father's /Husband's Name :						
(b) Mother's Name :						
(b) Notice 3 Name .						
10.7						
10. Permanent Address :						
STD Code Landline No.	Mobile No.					
E-mail ID						
11. Correspondence Address (if different from above) :						
	1 450 () 1					



Date : _____

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12. Educational Qual	ifications :					
Qualification	Name of School/ College/ Institution	Name of Board/ University	Year of Passing	Overall Marks (%) of Grade		
1.						
2.						
3.						
4.						
5.						
13. Aadhar Number :	:					
Certificate of NOC (For in s Please enclose Udaipur. Candidate car	Internship, Registration Certicervice candidates). e Demand Draft of Rs. 5000	n, UG Marksheets & Degree, PG ficate, Aadhar Card and Teaching. /- drawn in favour of Geetanjal or via courier to the Dean I	g/Clinical i Universi	Experience & aty payable at		
DECLARATION BY THE APPLICANT						
 I hereby declare that the above information is true and complete to the best of my knowledge and belief. I am aware that if any information herein is found to be incorrect or incomplete my application form will be rejected/admission will be cancelled. I am aware of rules and regulations of the objective type competitive examination, and if I am found using unfair means or committing any irregularity, I can be expelled from the examination or my result can be cancelled by the Geetanjali University. 						
D.D. No.	Amount (Rs.)	Date of Issu	ie			
Name of Bank & Branch						
Place :			Signature	e of Applicant		



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Annexure - 1*

Form to be retained at the Examination Centre

GEETANJALI UNIVERSITY

Udaipur, Rajasthan All India Pre-Ph.D. Entrance Examination: 2024-25

(All entries except Roll No. to be filled in by the candidate)			Roll No.	
			Paste Recent Passport Size Photograph (Do not staple / pin the Photo)	
	Signature attested			
Full Signature of Candidate (To be taken in the Exam. Hall)	Examination Centre Superintendent	Full Signature of Candidate (To be signed while filling form)		
	ETANJALI UNIVERSI Udaipur, Rajasthan Ph.D. Entrance Examina		5	
(All entries except Roll No. to be filled in by the candidate)		Roll No.		
			Paste Recent Passport Size Photograph (Do not staple / pin the Photo)	
Date : Controller of Examination				

^{*} Annexure-1 to be filled by the candidate and send back with original application form.